

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org



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STATE OF HOMES ON STATE ETHICS OF HMM SSIGN

LOBBYIST REGISTRATION FORM

	(Type	of Fiffit Clearly)	
PARTI LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
SAKAMOTO	LISA	M.K.	543-9409
MAILING ADDRESS (Street)	P.O. Box 3288 HONOLULU HI	96801	543-9458
(City)	(State)	(Zip	Code)
EMPLOYING ORGANIZATION (F	ill in only if you are employed by a busin	ess entity which has been retained to lobby)	TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip	Code)

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE		
HAWAIIAN TUG & B	ARGE		543-9311		
MAILING ADDRESS (Street)	P.O. Box 3288		FAX		
e de la Carlo de l	HonoLuLu HI	96801	543-9458		
(City)	(State)		(Zip Code)		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE			
LISA M.K. SAKAMOTO			543-9409		
MAILING ADDRESS (Street)	P.O. Box 3288		FAX		
	HonoLuLu HI	96801	543-9458		
(City)	(State)		(Zip Code)		
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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
Agriculture	Education	Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations International Affairs	, Tourism & Recreation			
X Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	X Transportation			
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)			
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections				
PART IV CERTIFICATION	OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. (Date)						
<u> </u>	(Bigilature of Lobbyist)	· · · · · · · · · · · · · · · · · · ·	(Date)			
PART V AUTHORIZATIO	N TO LOBBY					
NAME	I TO LOBB!	TITLE OF AUTHORIZING OFFICE	R OR PERSON REPRESENTED			
MARK HOUGHTON						
NAME OF ORGANIZATION (if applicable)			ELEPHONE			
HAWAIIAN TUG AND BARGE			543-9336			
MAILING ADDRESS (Street)	P.O. Box 3288 HonoLuLu HI 90	, ,	ax 5 43-947 7			
(City)	(State) (Zip Code)					
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
Mark Houghton 12/31/02						
(Signature of Au	horizing Officer or Person Represer	nted)	(Date)			